

PATENT

Attorney's Docket No. RA 5609 (33012/386/101)

COMBINED DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

TYPE OF DECLARATION

This declaration is of the following type:

- original
- design
- supplemental
- divisional
- continuation
- continuation-in-part (CIP)

INVENTORSHIP IDENTIFICATION

My residence, post office address and citizenship are as stated below next to my name, I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

TITLE OF INVENTION

METHOD AND APPARATUS FOR INFORMATIONAL COMPARISON OF MULTIPLE DATASETS IN A JAVASCRIPT ENVIRONMENT

SPECIFICATION IDENTIFICATION

the specification of which: (complete (a), (b) or (c))

- (a) is attached hereto.
- (b) was filed on _____ as Serial No. o / _____
or Express Mail No., as Serial No. not yet known _____

ACKNOWLEDGMENT OF REVIEW OF PAPERS AND DUTY OF CANDOR

I hereby state that I reviewed and understand the contents of the above-identified specification, including the claims, as amended by an amendment referred to above.

I acknowledge the duty to disclose information

- which is material to patentability as defined in 37, Code of Federal Regulations, § 1.56
and which is material to the examination of this application, namely, information where there is a substantial likelihood that a reasonable examiner would consider it important in deciding whether to allow the application to issue as a patent, and
- In compliance with this duty there is attached an information disclosure statement in accordance with 37 CFR 1.98.
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POWER OF ATTORNEY

I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

<u>Name</u>	<u>Registration Number</u>
John L. Rooney	28,898
Lawrence M. Nawrocki	29,333
Wayne A. Sivertson	25,645
Richard C. Stempkovski, Jr.	45,130
Michael B. Atlass	30,606
Mark T. Starr	28,762

DIRECT ALL CORRESPONDENCE TO:

Unisys Corporation
Charles A. Johnson
P.O. Box 64942
M.S. 4773
St. Paul, MN 55164
Customer # 27516

DIRECT TELEPHONE CALLS TO:
(Name and telephone number)

(651) 635-7702

DECLARATION

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

SIGNATURE(S)Full name of first inventor Barbara A. ChristensenBarbara _____
(GIVEN NAME) A. _____
(MIDDLE INITIAL OR NAME) Christensen _____
FAMILY (OR LAST NAME)Inventor's signature Barbara ChristensenDate 5/14/04 Country of Citizenship USAResidence 6520 White Oak Road, Lino Lakes, Minnesota 55038Post Office Address 6520 White Oak Road, Lino Lakes, Minnesota 55038Full name of second inventor Michael J. HillMichael _____
(GIVEN NAME) J. _____
(MIDDLE INITIAL OR NAME) Hill _____
FAMILY (OR LAST NAME)Inventor's signature Michael J. HillDate 5/13/2004 Country of Citizenship USAResidence 4236 Heritage Drive, Vadnais Heights, Minnesota 55127Post Office Address 4236 Heritage Drive, Vadnais Heights, Minnesota 55127Full name of third inventor Kenneth L. ReisingKenneth _____
(GIVEN NAME) L. _____
(MIDDLE INITIAL OR NAME) Reising _____
FAMILY (OR LAST NAME)

Inventor's signature _____

Date _____ Country of Citizenship USAResidence 48 West Marie Avenue, West St. Paul, Minnesota 55118Post Office Address 48 West Marie Avenue, West St. Paul, Minnesota 55118

Full name of fourth inventor John C. HortonJohn
(GIVEN NAME)C.
(MIDDLE INITIAL OR NAME)Horton
FAMILY (OR LAST NAME)Inventor's signature John C. HortonDate 5/13/04 Country of Citizenship USAResidence 1259 Sargent Avenue, St. Paul, Minnesota 55105-2720Post Office Address 1259 Sargent Avenue, St. Paul, Minnesota 55105-2720Full name of fifth inventor Eugene J. GretterEugene
(GIVEN NAME)J.
(MIDDLE INITIAL OR NAME)Gretter
FAMILY (OR LAST NAME)Inventor's signature Eugene J. GretterDate 5/13/04 Country of Citizenship USAResidence 7178 Snow Owl Lane, Lino Lakes, Minnesota 55014-1942Post Office Address 7178 Snow Owl Lane, Lino Lakes, Minnesota 55014-1942